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FROM THE WEST COAST TO THE IVORY COAST, DR. SHERRY WREN MAKES A WORLD OF DIFFERENCE

BY KATHY CHIN LEONG | PHOTO BY CHRIS AYERS

August 10, 2011 Duekoué, Ivory Coast

Hello again, night comes, Ramadan continues, and the call to prayer is loud and reverberates through the town. Death was the visitor of the day. First was an old man who had a dead colon when we operated on him. This morning it was clear he wasn't breathing well...within the hour, he was dead.

More tragic was the 12-year-old girl that a minivan hit... they carried her in, she already had a blown pupil (sign of major brain hemorrhage) and she was gasping for air. We have no ability to do a craniotomy or even a blind burr hole so she was dead within the hour. On the good side, the patients are thankful; I have saved lives, especially people with intestinal perforations and gun shots, so it is not all bad.

At about midnight when the chaos eases, Dr. Sherry Wren indulges in a sliver of calm to write to friends and family. Chronicling her journey helps her process the emotional fallout. Pecking away on a French keyboard, she apologizes for any typos. But, what are a few misspellings compared with working 13-hour shifts or sweating in a plastic apron while operating on patients in 98-degree heat?

On her fifth volunteer odyssey for Doctors Without Borders—an international organization of humanitarian medical teams—Wren served in an African hospital in Duékoué, Ivory

Coast, where French is the official language. It was a bloody time, as militia groups turned up the heat, pitting one political faction against the other. Massacres, mindless shootings and lootings were—and still are—commonplace in this almost forgotten land. Riddled with poverty, the country remains a tinderbox ready to explode.

After last summer's stint in Africa, Wren was ready for the long flight home to the Bay Area. She caught up on her recreational reading. She compartmentalized her thoughts, letting go for awhile of the tumultuous events of the past month. She looked forward to sharing stories with Joe, her engineer husband, and wrapping her arms around her two English bull terriers. She anticipated reconnecting with her colleagues at Stanford University Medical Center and the VA Palo Alto Health Care System, where she works as chief of general surgery.

But most of all, she looked forward to taking a hot shower.

The day after she touched down on American soil, Wren was back to work, resuming a demanding schedule that involves operating on patients with gastrointestinal cancers (her specialty), advising medical students, speaking to professional groups and serving on faculty committees, some of which she leads.

"I process by going right back to work," she explains. In addition to her position as a professor of surgery, she also serves as an associate dean at Stanford University's School of Medicine.

An arduous work ethic keeps Wren grounded, focused and laboring long hours when she is here and abroad. In Africa, while other Doctors Without Borders team members insist the group



AN URGE TO SHARE SURGICAL SKILLS

hroughout her early career, Wren always imagined she would someday volunteer as a surgeon, but it wasn't until Hurricane Katrina hit in 2005 that she solidified that commitment. Television images of death, devastation and lack of emergency rescue systems propelled her to seek an altruistic outlet for her medical expertise.

"By the time I finished training as a surgeon, I was 35 years old, and it took time to develop my career and to make sure it was established enough so I could handle being away for a while," she says. After scouring the Internet, she decided to hook up with a group that originated in France—Medécins Sans Frontières (MSF)—known here as Doctors Without Borders. Her goal was simple: work with a group that has no religious or political affiliation and be placed in a country in crisis that would directly use her surgical skills. A completely neutral organization, Doctors Without Borders offers free medical assistance to those suffering who have little or no access to health care (see sidebar).

Qualified surgeons and anesthesiologists volunteer one to three months in the field and are required to be on call 24 hours a day. Melissa Bieri, the group's field human resources officer in New York, calls the assignment "a grueling time period."

During Wren's first stint with MSF in 2006, when she was

assigned to Bouaké, Ivory Coast, her biggest challenge was communication. She had to rely on her high school French to talk to the local doctors and the medical personnel from MSF, as well as to patients. Since that time, she has worked for MSF in the Democratic Republic of Congo, Chad, and a second mission in Ivory Coast, where she now feels more comfortable with the language.

After five years of service, Wren approaches her missions ready to do anything. "We are so specialized in this country," she says. "But there, I do everything—C-sections, orthopedic surgery, neurosurgery, dentistry, you name it."

COPING WITH CONDITIONS, DANGER

July 31, 2011

Duekoué, Ivory Coast

Tomorrow starts the week where everyone is holding their breath to see if there is any fighting. So far it is quiet, everyone hopes it stays so. If shooting starts, it will be a challenge. We have no blood, and the MOH (Ministry of Health) will not allow us to start up our own blood bank. We have one OR and only a few sets of instruments. If anything happens, will make do.

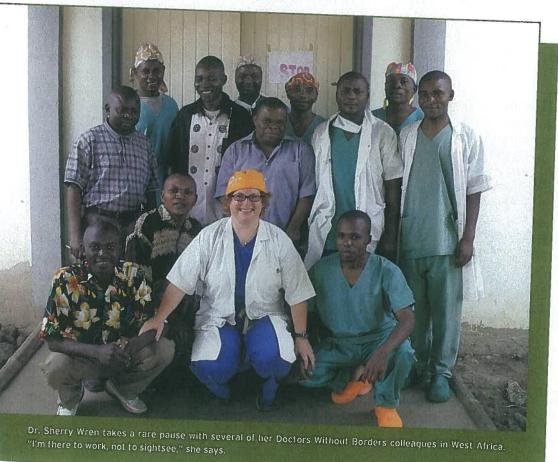
In the field, Wren regularly has to make do. "Once I had a guy with three liters of pus in his chest, and air was leaking out of his lungs," she recalls. With no access to a suction tube for the procedure, Wren was forced to jerry-rig a replacement in order to save his life. "I used what limited resources I had," she

says. "I may have six sutures to choose from in Africa. But here, it is a luxury to choose from over 50 boxes of sutures to get just the right one."

Getting used to limited resources is one thing, and adjusting culturally is another. In Africa, she saw firsthand how a woman must get permission from her husband before she is allowed to undergo a surgical procedure involving a reproductive issue.

In another email journal, Wren explains how some Africans believe surgery is a good and anticipated event. People will come into the clinic screaming and acting so that they can receive an operation. Stranger still is the custom of nurses showing the patient's removed organs and tumors to the family, as if the sight brings a sense of satisfaction or closure to the procedure.

While Wren's friends and family are proud of her international endeavors, they are



concerned. "I would never tell her not to go," says Dr. Myriam Curet, a Stanford professor and consultant in the department of surgery. "We all worry about her. She would never *not* go, so I tell her, 'be careful."

Wren's husband Joe is not overjoyed with her choice to frequent war-torn nations, either. "He would be happy if I didn't go," she says. "In the field, I call him twice a week and let him know I am ok. It's always good to hear his voice."

July 2009, Rutshuru, Congo

Yesterday was a very difficult day... the head nurse from the Bloc (OR) came to the house to say that one of the nurses, Jackson, had been shot to death in his home, which was close by. Two soldiers entered the house and shot him once in the chest. They stole nothing, and no one knew the reason why. His body was brought later that day to the hospital and laid out in an open coffin.

Wren is not completely fearless when she is on MSF missions. It still unnerves her to see young men brandishing assault rifles, many either high on drugs or drunk. At a checkpoint in the Congo, an armed guard once stopped her and, within inches of her face, began shouting at her. "I just smiled and smiled, and he finally calmed down and let me go."

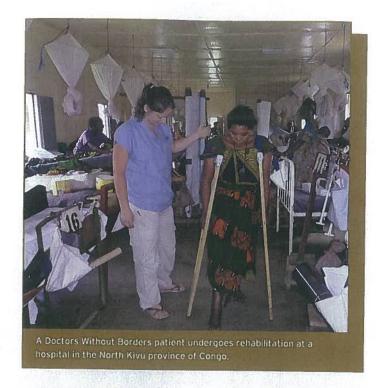
In Africa, she is aware of her race every moment. Children reach to touch her skin while toddlers scream in fear because they have never seen a white person before. Each day villagers stare, calling out "mizungu" or "blanche" (white man) wherever she walks. Wren tries to keep a low profile, but in Africa, "you stick out like a sore thumb."

Will Wren go anywhere there's a cause? She sets her own boundaries: No working in countries where Americans are a known target, and no working in places where the country has ignored neutrality agreements. Wren says she takes calculated risks but acknowledges the stakes are high wherever she volunteers: "In a crisis situation, anything can happen," she says.

GROWING UP HARDY

ren's childhood in her native Chicago provides clues to the source of her bravado and sense of adventure. Growing up with lively brothers resulted in a "perfect upbringing" that helped her prepare for the male-dominated medical school at Loyola University in Illinois and also at Yale University, where she started her surgical residency. Unaffected by her testosterone-amped colleagues, she could argue and fight with the toughest of them. That confidence continues today. Says friend and surgeon Dr. Kim Rhoads, "She can go toe to toe with any of these guys (doctors) and take them down in a minute. She is not intimidated in the slightest."

Wren's father, a TV repair shop owner, and her stay-at-home mother passed on traits of strength and independence to their brood. If the children fought, they were to work out differences among themselves. Complaining was not tolerated. "We couldn't watch 'I Love Lucy' because my mother didn't want us to imitate Lucy's whining," recalls Wren. "We couldn't watch the 'Three Stooges' because she thought this would make us stupid."



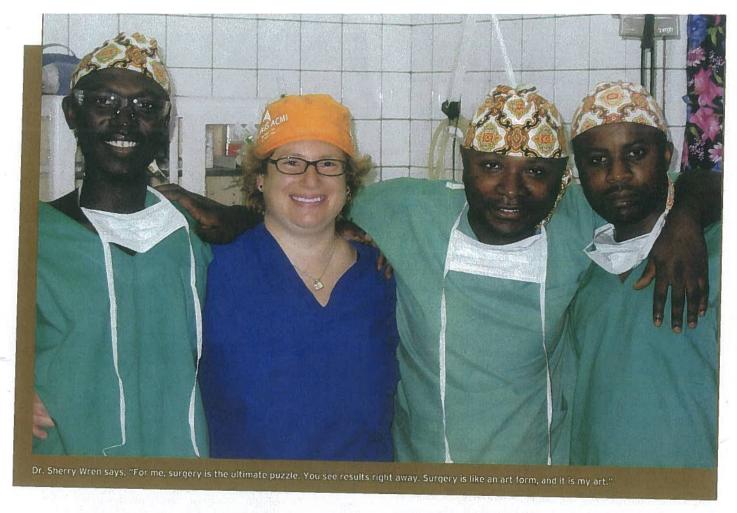
DOCTORS WITHOUT BORDERS: VITAL STATISTICS

DOCTORS WITHOUT BORDERS was founded in France as Medécins Sans Frontières (MSF) in 1971 by a group of French doctors and journalists. This neutral, international organization with U.S. offices based in New York is not influenced by any political agenda and helps to aid ordinary people in crisis due to natural disaster, violence, epidemics and other threats to their well being. For more information, visit www.doctorswithoutborders.org.

These facts and statistics tell a part of the Doctors Without Borders story in saving lives:

- On any given day, some 27,000 doctors, nurses and nonmedical support staff are providing care to people in nearly 60 countries.
- Approximately 170 U.S. workers are deployed in the field.
- Headquartered in Geneva, Switzerland, MSF can be found in 19 support offices around the world.
- MSF field staff receive a monthly gross salary of \$1,404 and have their meals, transportation, medical insurance and emergency evacuation covered.
- Medical volunteers must have a minimum of two years of professional experience and be available for a minimum of nine to 12 months. Surgeons, anesthesiologists, nurse anesthetists and OB/GYNs receive shorter assignments.
- The majority of medical teams are comprised of 10 percent international staff, 90 percent local aid workers.
- In 1999, MSF received the Nobel Peace Prize.
- MSF medical teams often speak out publicly in an effort to bring a forgotten crisis into view.
- In 2009, 200 aid workers came from the U.S. and completed nearly 300 assignments; in 2010, 340 U.S. volunteers were sent on 435 assignments to 45 countries.
- In addition to heath and emergency services, MSF also establishes feeding programs, provides mental health services, constructs wells and dispenses drinking water and offers blankets and plastic sheeting for shelter.





Her Depression-era parents modeled a strong work ethic that would become ingrained in Wren's own value system. All of the children helped their father in the repair shop, and everyone worked on chores at home. Then, as soon as she was old enough to earn a paycheck, Wren trotted off to work as a hostess at Red Lobster and as a sales clerk in Marshall Fields department store.

She was always successful in school, and with grades so impressive, Wren's mother encouraged her to skip her senior year in high school and head directly to college. So after her junior year, this "high school dropout" was accepted to Carleton College, a private liberal arts school in Northfield, Minn., where she majored in biology. Her grandmother was so proud that she paid for half of Wren's medical school tuition using her steel mill pension.

Thriving on challenge and knowing she could work well with her hands, she chose surgery. "For me, surgery is the ultimate puzzle. You see results right away. Surgery is like an art form, and it is my art," she explains.

Wren is known for taking care of her patients from the beginning of their treatment through follow-up visits that will last a lifetime. For years, a patient from Los Angeles phoned her every Thanksgiving to thank her for saving his life. She takes on every case with humility, knowing that within a 45-minute visit, a family and the patient has to decide whether or not they will trust her to operate.

Lucky is the patient who has Wren on his or her team. "I have seen it in person," says Dr. Michele Barry, the director for the Center for Innovation in Global Health at Stanford Medical Center. "She is always advocating for them."

PASSION, COMMITMENT ARE DRIVING FORCES

August 2009, Rutshuru, Congo

Last night we had a 2-year-old with a machete injury to the top of his head that cut the bone; you wonder who could hit a child in the head like that. My last case was a Cesarean for a dead baby, not quite the surgical high note you would like to end on.

Wren's journal entries often speak of the children she meets and their pain and hardship. "I have seen some pretty horrific things," she says of her trips. A 3-year-old with genital warts, which could only come from sexual abuse, had no one to defend him. The infants and adults who died of tetanus never received basic vaccinations. "Children really pay the price of suffering," she laments.

There is no end to the events that shock and amuse her, but these MSF experiences expand Wren's world view and underscore her sense of urgency to be the voice for the oppressed. After her first trip with MSF, her eyes were immediately opened to the vast amount of medical wastefulness that occurs in the U.S. "Now I get upset if the nurses open something that I don't need in the OR," she says. "They know that."

Wren often thinks about public policy and how the U.S. can serve its citizens better. "If people are dying over basic things," she says, "is it wise to put up millions for HIV meds or should you choose to spend the money on tetanus shots and public health measures?"

According to Barry, "Sherry has a strong sense of social justice. She is very passionate about the underserved population." Perhaps that compassion for the underdog is why she accepted the offer of chief of general surgery for the Palo Alto VA Hospital in 1997.

"Many of the vets are 65 to 70 years old," explains Dr. Thomas Burdon, surgeon and professor of cardiothoracic surgery at Stanford. "Many others have been laid off, and the VA is the system that has absorbed these people. They have serious health conditions. They are the most challenging patients I have ever seen in my life."

Recognizing Wren's zeal, brash honesty and commitment, Burdon tapped her to revamp the entire surgery department when she came on board. Since her time at the hospital, she has transformed the department into a world-class surgery center with state-of-the-art equipment and techniques. The center recently served as a clinical trial site for a new type of robotic procedure used for gall bladder surgery that improves accuracy and makes only a single small incision in the belly less than 2 inches wide.

While her office is filled with framed awards and national accolades, Wren points to a few of her favorite treasures. A fabric-covered footstool that she uses daily is perched beneath her work desk. She's touched that the stool was crafted by a former patient. On another table sits a wooden bird carved by another grateful survivor. These gifts of the heart are what endear Wren to the veterans she serves.

People who know her all weigh in on one aspect of her personality: Wren is never afraid to speak her mind. "She calls it as it is," says Barry. Colleagues agree that Wren isn't one to toe the

accumulated no less than seven local and national awards for her teaching and dedication to advising medical students and residents. "She takes her teaching responsibility very seriously," stresses Curet. "Doctors who really take the time to care and teach students at length are in the minority."

Wren is particularly concerned for the female surgeons who step into the Stanford fold. With so few on the medical map, she is eager for them to succeed. When Rhoads first came to work as a surgeon and faculty member in 2008, she says Wren sought her out. "Sherry took the time to talk to me," Rhoads recalls, "and I felt that she was always there checking to make sure everything was ok."

Wren is always available for midnight phone calls seeking advice, Rhoads says. "Sherry is the epitome of a mentor; she is not steering me to be like her. She is looking out where my own trajectory may go," Rhoads says. Wren has furthered Rhoads' career by giving her personal recommendations and directing her to appropriate people. "She knows where the leverage points are, and she can make things happen," Rhoads explains. "Everything she does is purposeful and deliberate."

Wren's colleagues are constantly amazed when they hear about her work overseas. "I have so much admiration for Sherry," Curet says. "When she is out there, she operates on everything including C-sections, setting bones, taking out tumors and going beyond her own area of practice. There is no way I could do this."

In addition to running the surgery division, mentoring, conducting medical research, writing papers and heading off to MSF missions, Wren actively involves herself in leadership roles for organizations such as the American Cancer Society,

THERE IS NO END to the events that shock and amuse her, but these MSF experiences expand Wren's world view and underscore her sense of urgency to be the voice for the oppressed.

political line or do things only because they've always been done that way. She will not hesitate to question the system.

She knows herself well, Curet says. "Running the surgery department for the VA, you have to be tough and fair and not worry about people liking you. Sherry has had to make difficult choices, such as how resources are allocated and how to balance people regarding who gets what."

A MENTOR WITH METTLE

n adviser and professor to Stanford University medical students, Wren will make every effort in the operating room to teach them about anatomy and surgery while she is operating on a patient. "When she sees something interesting in anatomy, she makes sure students understand what is going on," Curet says. It is not out of the ordinary for Wren to invite students to touch an organ and peer deeper into an open cavity. "She is very attuned to her students and makes sure they are not ignored."

It is no wonder that medical students at Stanford voted and honored her with the very prestigious Kaiser award in 2002 and 2006 for excellence in clinical teaching. To date she has the Society of Gastrointestinal and Endoscopic Surgeons and more. Prestigious appointments have landed her as governor in the American College of Surgeons and previously as the chair of the faculty senate at Stanford University Medical School. Says Curet: "She literally has the ability to work 20 hours a day."

And even Wren's hobbies require preparation, work and skill. On a recent vacation with her husband, she convinced him to dogsled, and they each ran a dogsled that they mushed for 25 to 30 miles a day in Minnesota. As another example, one of Wren's biggest passions is scuba diving in exotic places such as Indonesia or New Guinea, where she must wake up at the crack of dawn to suit up. For her, descending to the bottom of the ocean floor is the most peaceful thing she can do, for no one can reach her by cellphone, and her only job is to look around at all the fish, most of which she can name.

Wren says the MSF trips continually stretch her surgical acumen and challenge her positions. "You can be depressed about a situation or change it," she says. "I can save hundreds of lives but not millions. I know I will never invent a vaccine that will cure a population or win the Nobel, but I can save a life, one person at a time. Who knows? That kid I operated on who had typhoid, maybe he will be the next president of that nation."